

Latch Key Provider Form

According to IC 20-26-5-2 your school corporation is required to offer a school-age child care program. A school may contract with a not-for-profit or for-profit organization to conduct its programs. However, the legislation requires for the programs to be utilized at school facilities.

SECTION I:	
Corporation Name	_ Corp #
County/ Township	
$\hfill \square$ No, we are not offering a Latch Key program. Wavier form attached.	
☐ Yes we will be offering a Latch Key program at our School/Organization	
If you checked YES, please fill out Section II of this form on pages 2 and 3.	
Did you facilitate a parent survey?	
□ Yes, results are attached	
□ No	

SECTION II:

Indiana Department of Education is partnering with the Indiana Afterschool Network to track comprehensive school-age childcare (i.e. afterschool and summer learning programs) statewide in order to:

- ☼ Identify the need for afterschool and summer programs and gaps in available services to influence statewide planning
- ☼ Build/expand the searchable database and map of program locations and activities for schools, parents, and community organizations

The following information will be entered into the Indiana Afterschool Network Database, with a link on the DOE website: www.indianaafterschool.org

AFTERSCHOOL PROVIDER INFORMATION (If you have more than one provider, you may complete pages 2 and 3 of this form for the most comprehensive program, or complete one for each provider)

Organization Name (or School Name, i	f you are the progra	am provider):	
Primary Contact Person for the Afterso		t & Last Name):	
Address:			
City, State, Zip:			
Website:			
Phone:	Fax:		
Number of years in operation:			
Afterschool Program Description:			
Where is the program located?			
□School □Community-Based Org □Other	□Faith-Based Or	g	
Average # children/youth served daily	/		
□ 1-20 □ 21-50	□ 51-100	□ 101 +	

What is the grade level of your participants? (check all that apply)										
	□K	□1 st	□2 nd	□3 rd	$\Box 4^{th}$	⊓5 th	$\Box 6^{th}$			
		□9 th	 □10 th		□12 th					
Program Calendar (check all the Before School ☐ Weekends ☐ Summer			hat apply) After School School Breaks/Vacations Other							
□ Tutoring □ Academ □ Science □ Visual & □ Cultural □ Charact □ Civic En □ Sports & □ Health & □ Mentor □ College □ Career/	& Recreation & Wellness ing Readiness Job Explor & Parent A	work nent logy ng Arts nt on								
□ Transpo □ Funding □ Commu □ Staffing □ Training □ Volunte □ Parent I	ortation i nity Partno s ers nvolvemei on/Trackir	ers		to expand	ling & dev	eloping yo	ur program?			
Type of Control Rural Urban Suburba	ommunity an	(check all	that apply	·)						
Office of I 151 W. Ol	riscoe epartmen ntegrated	Services	tion							